U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

10/660,127

September 10, 2003

Application Number

Filing Date

TRANSMITTAL

FORM			First Named Inventor Art Unit		Satoru	Satoru Yukie et al.	
					2617	2617	
(to be used for all correspondence after initial fil			iling)	ing) Examiner Name		Larry Hannif Ali	
Total Number of Pages in This Submission			18 Attorney Docket Number		113750	113750-2002US	
ENCLOSURES (Check all that apply)							
	Fee Tran	nsmittal Form		Drawing(s)		After Allowance Communication to TC	
	i	Fee Attached	Licensing-related Papers  Petition			Appeal Communication to Board of Appeals and Interferences	
$\boxtimes$	Amendm	nent/Reply				Appeal Communication to TC	
		After Final	Petition to Convert to a Provisional Application Power of Attorney, Revocati Change of Correspondence Terminal Disclaimer	Provisional Application		(Appeal Notice, Brief, Reply Brief)  Proprietary Information	
		Affidavits/declaration(s)				Status Letter	
$\boxtimes$	Extensio	n of Time Request			Other Enclosure(s) (please Identify		
	Express	Abandonment Request	Request for Refund		below):		
Information Disclosure State		on Disclosure Statement	╵╵	CD, Number of CD(s) Landscape Table on			
Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts		Remarks					
	,	under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm N	ame	Procopio, Cory, Harg	ory, Hargreayes & Savitch LLP				
Signature		Full te					
Printed name		Samuel 8. Lee					
Date		September 7, 2006			Reg. No.	42,791	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including patienting, preparing, and submitted the correlated special patients of the control of the contr

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.